



National Institute of
Neurological Disorders
and Stroke

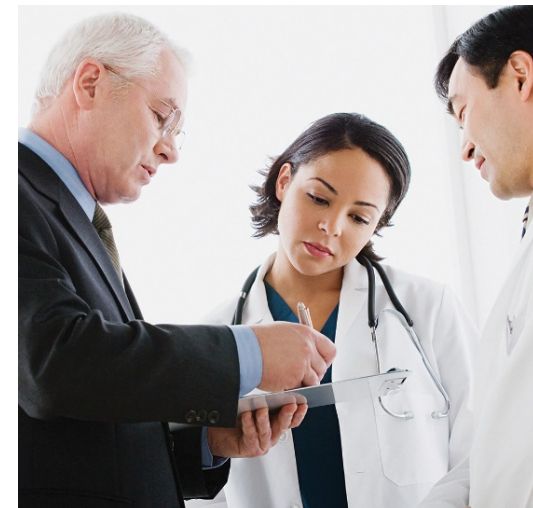
The Opioid Epidemic: How, Where, and What Can Be Done?

*NIH Demystifying
Medicine Lecture Series*

April 17, 2018

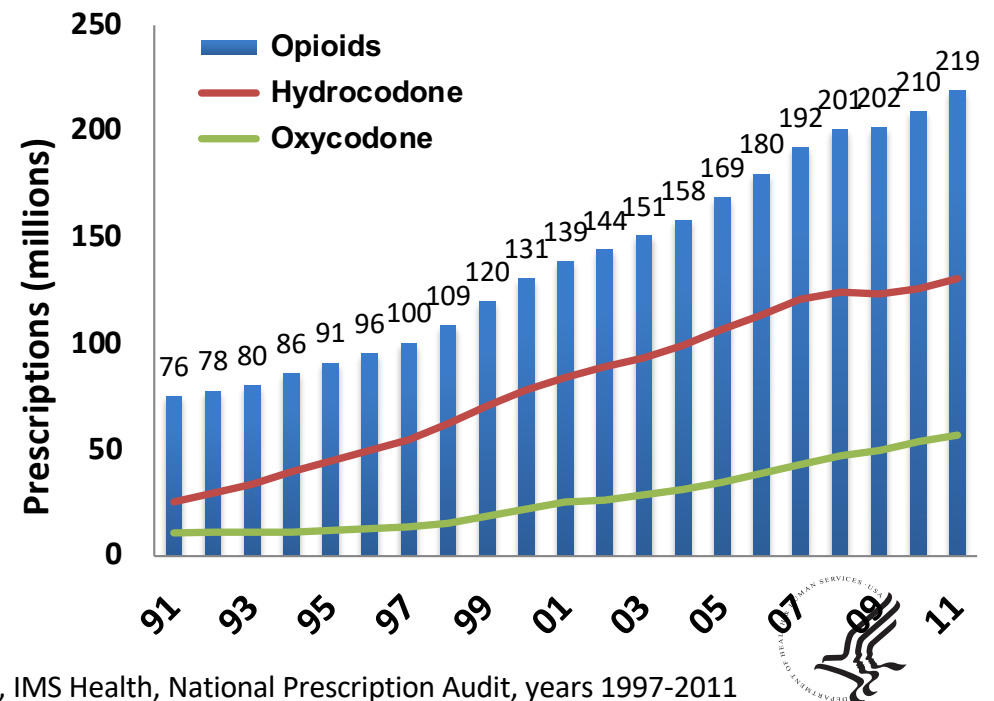
Walter J. Koroshetz, MD, FAAN

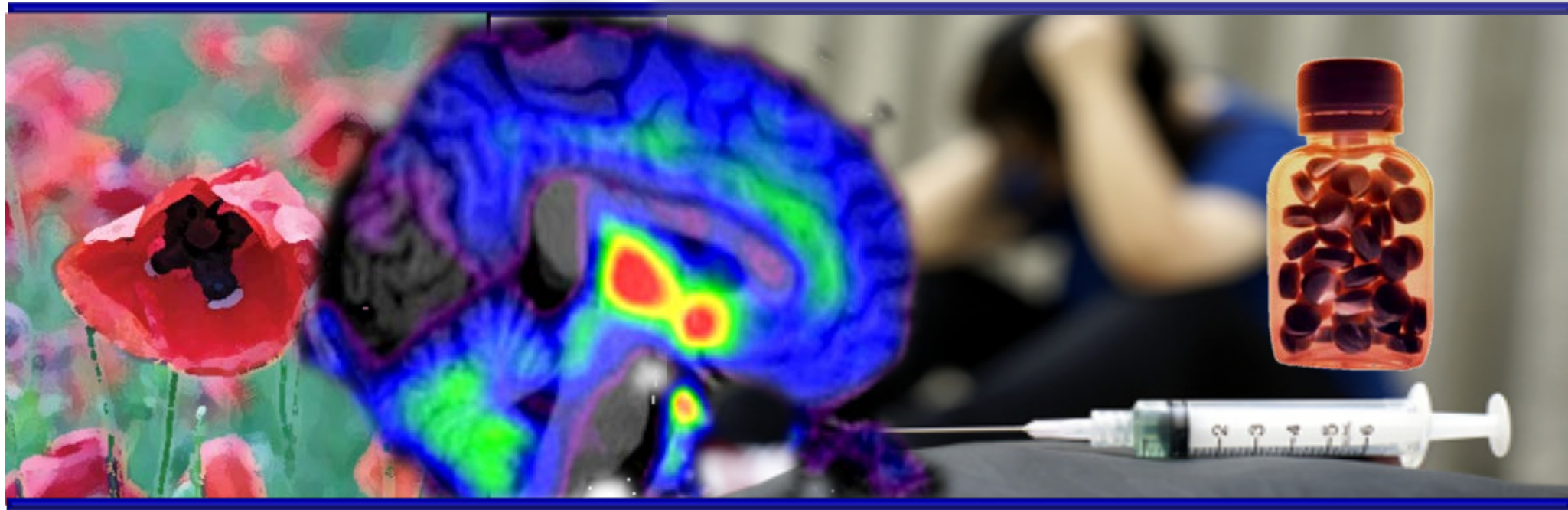
Director, National Institute of Neurological
Disorders and Stroke, NIH



Balancing act of treating pain

- 100 million American adults have pain
 - 40 million have severe pain
 - 25 million report daily pain
 - 8 million have pain that interferes with lifestyle

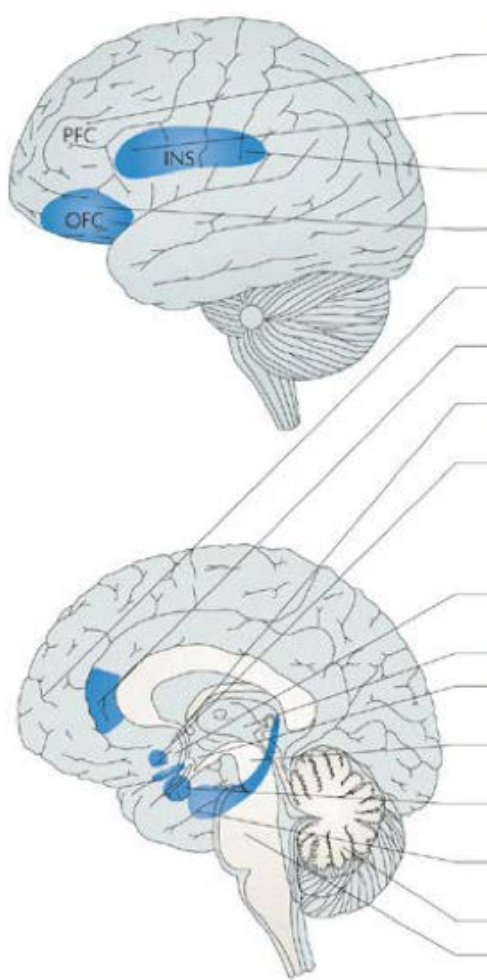




Pain is at the root of the opioid epidemic

“Nature has placed mankind under the governance of two sovereign masters, Pain and Pleasure” - Jeremy Bentham

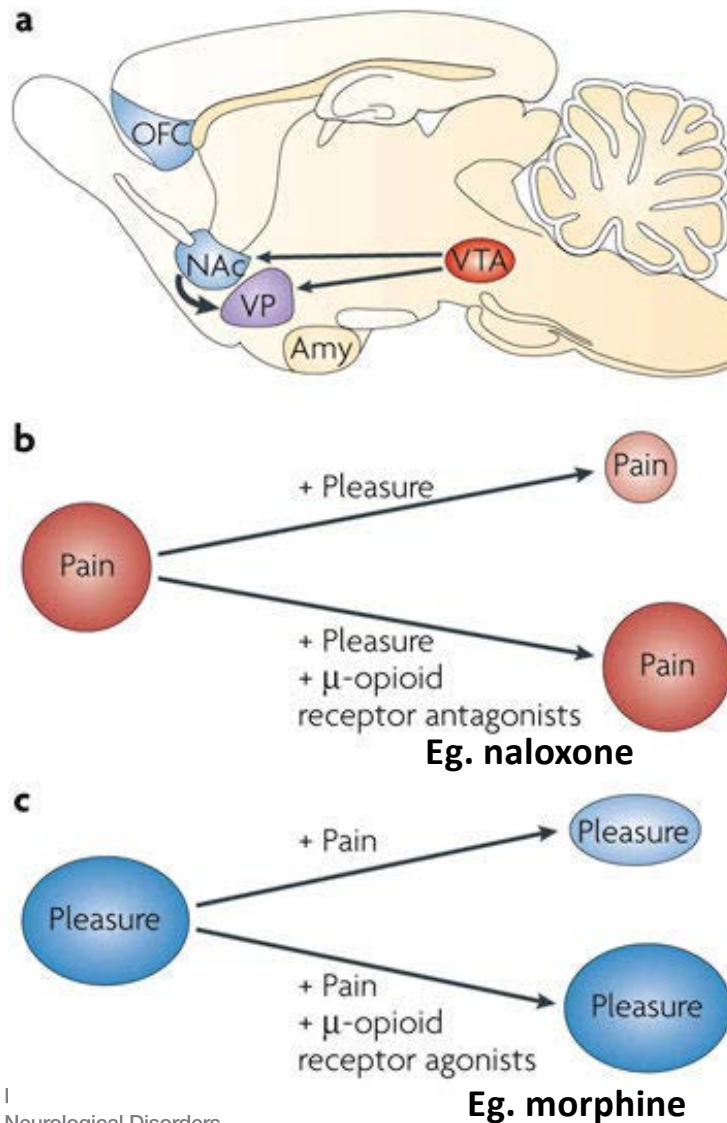
Brain regions implicated in pain and reward processing by neuroimaging and electrophysiology studies who striking overlap.



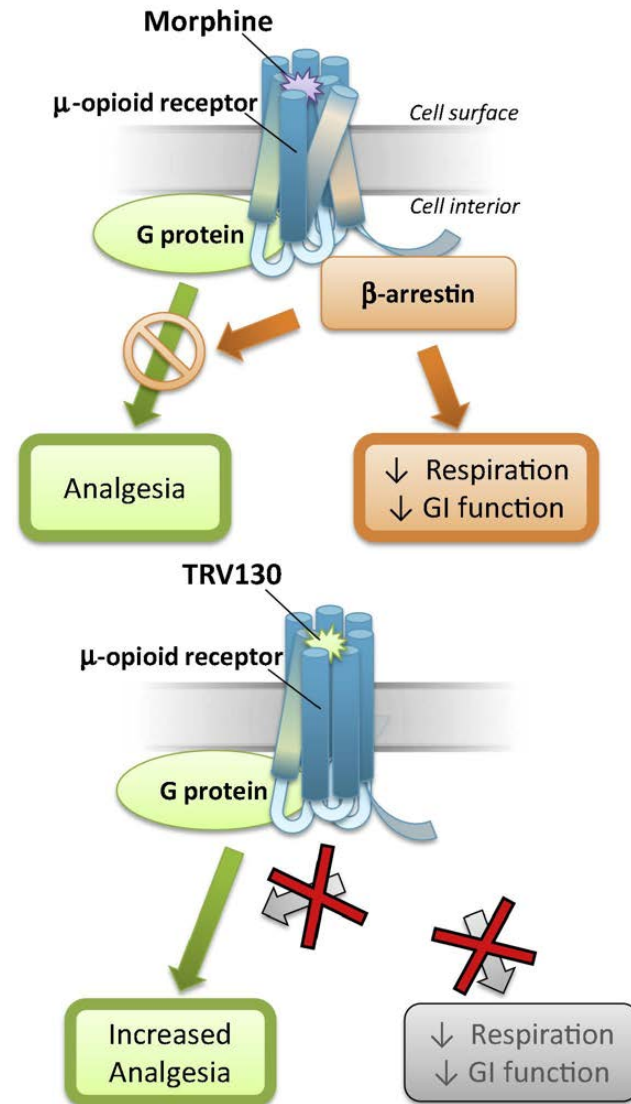
Region	Pleasure/reward	Pain
Lateral prefrontal cortex	• Humans, fMRI, taste reward ¹⁰¹	• Humans, H ₂ O PET, hyperalgesic pain ¹⁰² • Humans, fMRI, pain ¹⁰¹
Anterior insula	• Humans, fMRI, food cravings ¹⁰⁴ • Humans, H ₂ O PET, chocolate reward ⁷⁵	• Humans, fMRI, pain ¹⁰⁵ • Humans, fMRI, placebo analgesia ¹⁰⁶
Posterior insula	• Humans, fMRI, hypothetical reward ¹⁰²	• Humans, direct brain stimulation ¹⁰⁸ • Humans, fMRI, pain ¹⁰⁵
Orbitofrontal cortex	• Humans, fMRI, pleasant touch ⁷⁴ • Humans, fMRI, chocolate reward ⁷⁵	• Humans, fMRI, pain ⁷⁴ • Humans, fMRI, placebo analgesia ¹⁰⁶
Medial prefrontal cortex	• Humans, H ₂ O PET, pleasurable music ⁶⁴ • Humans, fMRI, monetary reward ¹⁰⁹	• Humans, fMRI, pain ^{110,111}
Anterior cingulate gyrus	• Monkeys, electrophysiology ¹¹² • Humans, H ₂ O PET, chocolate reward ⁷⁵	• Humans, fMRI, pain ¹¹³ • Humans, opioid PET ⁴³
Dorsal striatum	• Humans, fMRI, fruit juice ¹¹⁴ • Humans, fMRI, monetary reward ¹¹⁵	• Humans, dopamine ligand PET, pain ⁴³ • Humans, fMRI, pain ¹¹⁶
Nucleus accumbens/ventral striatum	• Humans, fMRI and dopamine ligand PET ¹ , monetary reward ⁵⁵ • Rodents, hedonic hotspot, taste reactivity • Humans, dopamine ligand PET ⁴³ , drug reward	• Humans, dopamine ligand PET ⁴³ • Humans, fMRI, expectation of pain ⁴⁴ • Rodents, pain-induced analgesia ²⁰
Ventral pallidum	• Rodents, taste reactivity ^{52,65}	• Rodents, tracing, pain affect ⁷² • Humans, μ -opioid PET, sustained pain ²
Thalamus	• Humans, H ₂ O PET, chocolate reward ⁷⁵	• Humans, fMRI, placebo analgesia ¹⁰⁶
Hypothalamus	• Humans, H ₂ O PET, pleasurable music ¹¹⁷	• Rodents, tracing of nociceptive pathway ⁷² • Humans, direct brain stimulation ¹¹⁸
Midbrain	• Humans, H ₂ O PET, chocolate reward ⁷⁵ • Humans, H ₂ O PET, pleasurable music ⁶⁴	• Humans, fMRI, anticipation of pain ¹¹⁹ • Humans, fMRI, pain ¹²⁰
Amygdala	• Humans, H ₂ O PET, pleasurable music ⁶⁴ • Primates, reward anticipation/learning ⁶¹	• Humans, fMRI, pain ^{70,120}
Hippocampus	• Humans, fMRI, unexpected reward ¹²¹ • Humans, H ₂ O PET, pleasurable music ⁶⁴	• Humans, fMRI, pain ¹²² • Humans, fMRI, anticipation of pain ¹¹⁹
Cerebellum	• Humans, fMRI, unexpected reward ¹²¹	• Humans, fMRI, pain ¹²³
Brainstem	• Rodents, taste reactivity ¹²⁴ • Rodents, conditioned place preference ⁴⁰	• Humans, fMRI, pain ¹²³ • Rodents, pain ⁴⁰

Pain v. reward

Shared pathway



Opioid receptor mediates reward and analgesia and...death



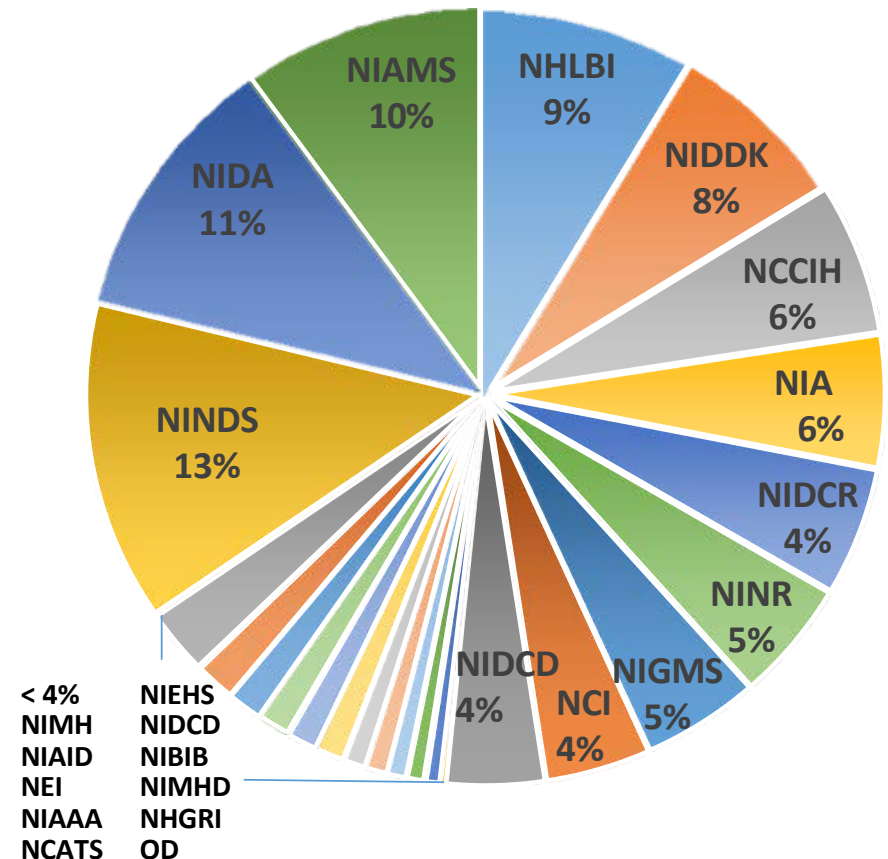
NIH Investment in Pain Research

In 2016, NIH invested \$483 million on pain research



Pain cuts across all 27 of the NIH Institutes and Centers.

Pain Research Funding by Institutes and Centers



The NIH Pain Consortium Membership

Mission

To enhance pain research and promote collaboration among researchers across the NIH Institutes and Centers that have programs and activities addressing pain

<http://painconsortium.nih.gov/>

National Cancer Institute

National Eye Institute

National Institute on Aging

National Institute on Alcohol Abuse and Alcoholism

National Institute of Arthritis and Musculoskeletal and Skin Diseases

National Institute of Biomedical Imaging and Bioengineering

National Institute of Child Health and Human Development

National Institute on Deafness and Other Communication Disorders

National Institute of Dental and Craniofacial Research

National Institute of Diabetes and Digestive and Kidney Disorders

National Institute on Drug Abuse

National Institute of General Medical Sciences

National Institute of Mental Health

National Institute of Minority Health and Disparities

National Institute of Neurological Disorders and Stroke

National Institute of Nursing Research

National Heart Lung and Blood Institute

National Center for Advancing Translational Science

National Center for Complementary & Integrative Health

John E. Fogarty International Center

Warren Grant Magnuson Clinical Center

Office of Science Policy and Analysis

Office of Behavioral and Social Sciences Research

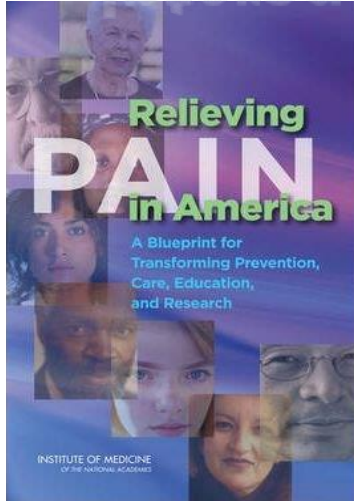
Office of Technology Transfer

Office of Research on Women's Health

Office of Rare Diseases

Institute of Medicine report led to the National Pain Strategy

NIH > The Interagency Pain Research Coordinating Committee



In response to the IOM's core recommendations: **"The NPS is the government's first broad-ranging effort to improve how pain is perceived, assessed, and treated: a significant step toward the ideal state of pain care."**



Coordinated roadmap toward improving U.S. pain care in:

- population research;
- prevention and care;
- disparities;
- service delivery and payment;
- training and professional/public education

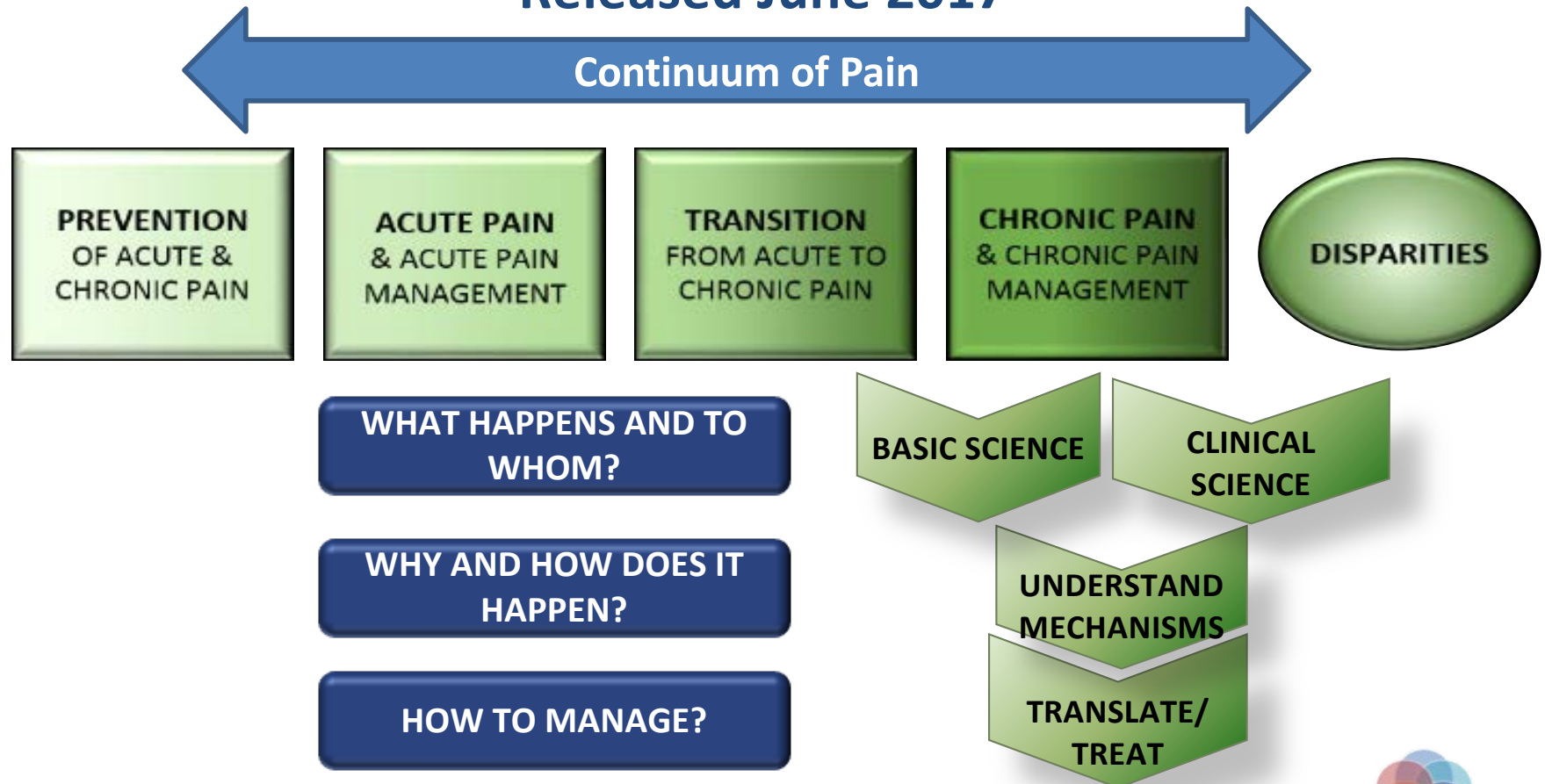
OASH is coordinating trans-agency implementation

National Pain Strategy



Federal Pain Research Strategy

Research Priorities to Guide the Federal Pain Research Agenda Released June 2017



NIH The Interagency Pain Research Coordinating Committee

<https://iprcc.nih.gov/>

NIH Pain Consortium

Centers of Excellence in Pain Education

CoEPES

CENTERS OF EXCELLENCE IN PAIN EDUCATION

NIH funded Centers of Excellence in Pain Education were created to **develop, evaluate, and distribute pain management curriculum resources** (case based studies) for medical, nursing, dental, and pharmacy schools to enhance and improve how health care professionals are taught about pain and treatment of pain.



Peter, phantom limb pain



Edna, 70, chronic low back pain



Morgan, 14, headaches



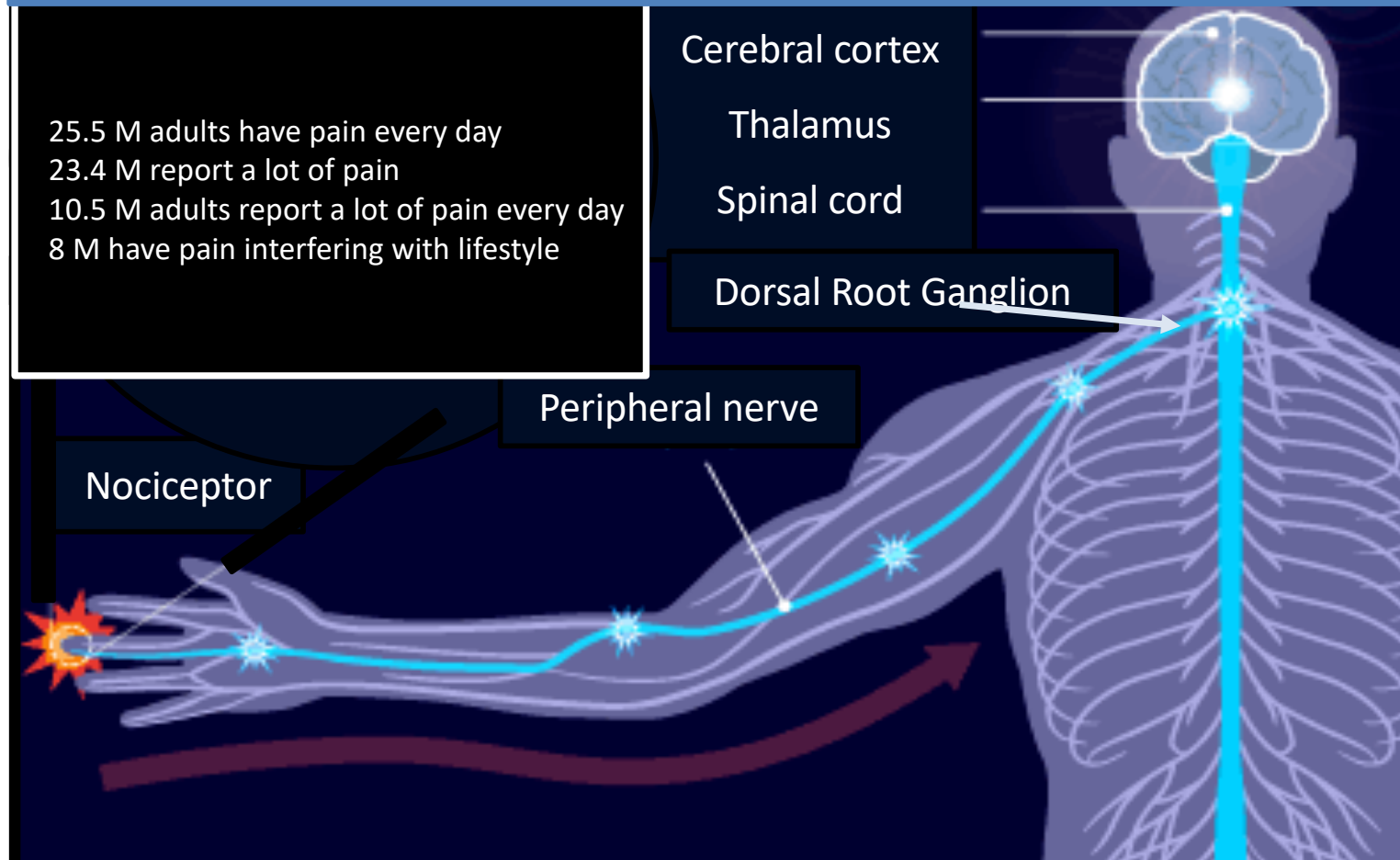
Beverly, 46, burning mouth syndrome

Harvard University
University of Connecticut
University of Iowa
University of Washington
Johns Hopkins University
University of Rochester

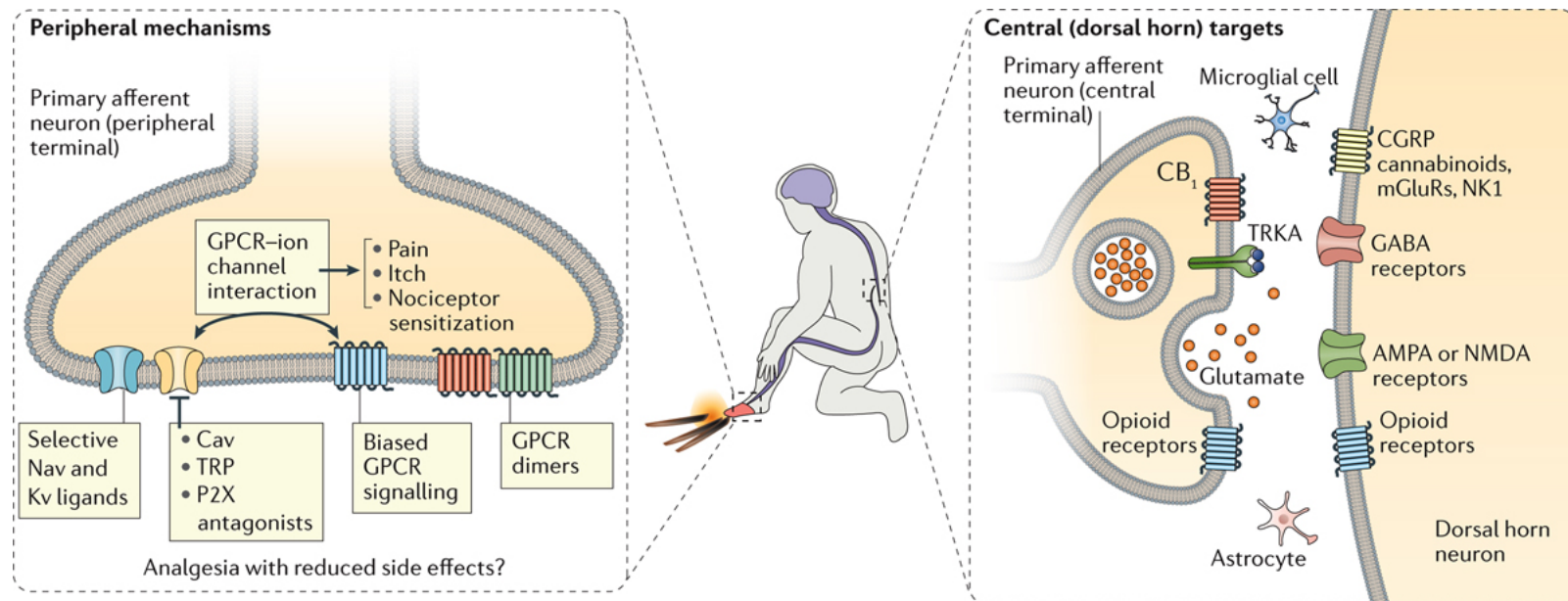
Southern Illinois University
St. Louis University
University of Alabama at Birmingham
University of Pennsylvania
Pittsburgh University

https://painconsortium.nih.gov/NIH_Pain_Programs/CoEPES.html

**Opioids act on reward circuits as well as pain circuits.
There are multiple non-opioid control nodes in the pain circuits
that should be targeted for non addictive pain treatments.**



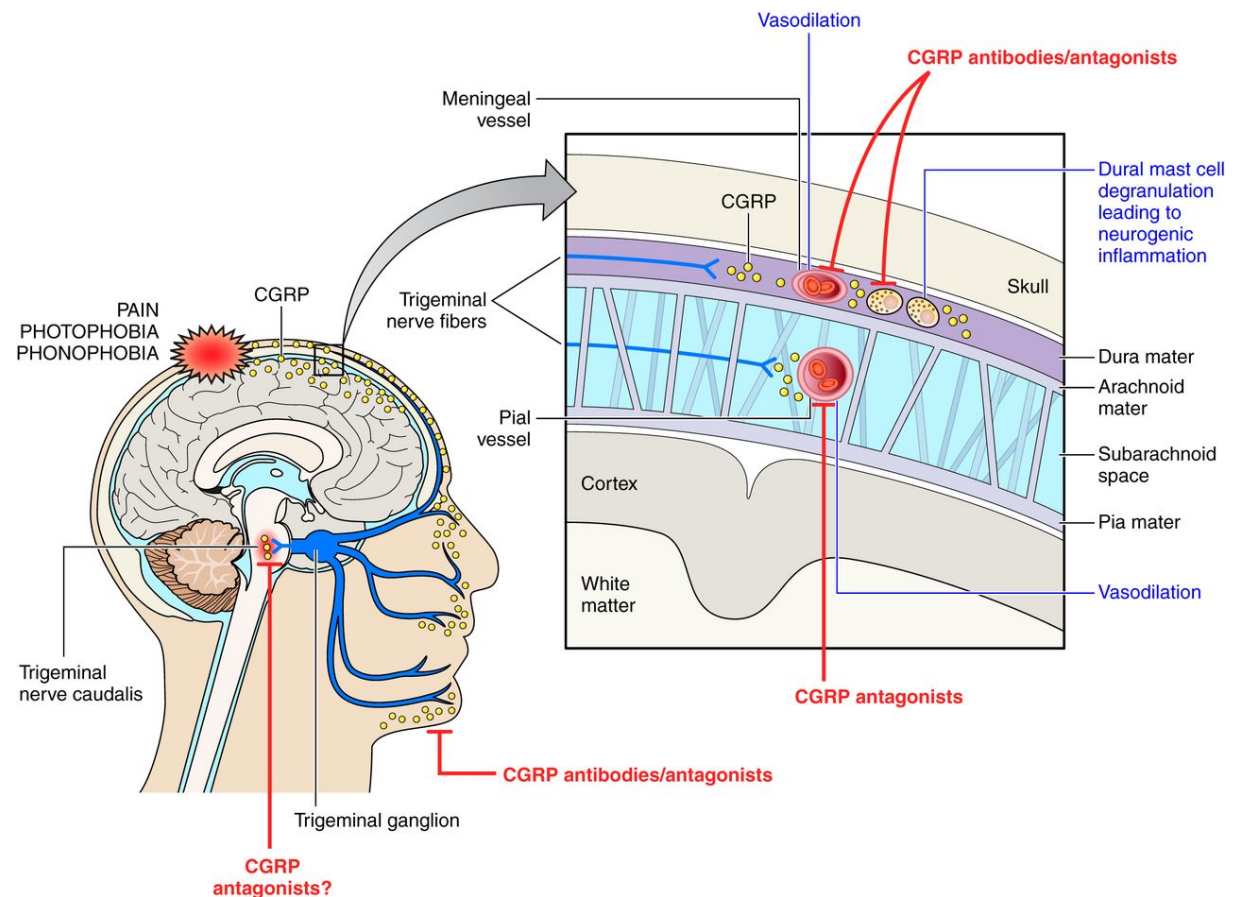
Advances in pain research: New Targets for Pain



- HSV vector driven expression of analgesic signals in DRG
- Transient receptor potential channels (TRPA1/4)
 - TRPA1 gain of function mutation causes familial episodic pain syndrome
- Voltage activated Ca⁺⁺ channel blockers
- K⁺ channels blockers
- Chemokine receptor antagonists
- Tetrahydrobiopterin from GTP release from injured neurons, polymorphisms in BCH1 enzyme linked to pain vulnerability
- Alpha2 adrenergic agonist
- Bivalent MOR with linked mGluR5 antagonist, CCR5 antagonist, delta OR antagonist,
- Epigenetic mechanisms involved in chronic pain
- microRNA cluster 183

Advances in Pain Research: cGRP for Migraine

- Calcitonin gene-related peptide (cGRP) levels:
 - rise during spontaneous migraine attacks
 - Increased levels in serum in chronic migraine patients
 - decrease in response to triptans in parallel with symptomatic relief
- Kappa Opioid Receptor (KOR) antagonists block increased cGRP
- Anti-cGRP Monoclonal antibodies are in phase 3 clinical trials for migraine prevention



Advances in pain research: Spinal Cord Stimulation and Opioid Use

RESEARCH—HUMAN—CLINICAL STUDIES

Lucy Gee, PhD*

Heather C. Smith, MD*

Zohal Ghulam-Jelani, BS*

Hirah Khan, BS*

Julia Prusik, BS*

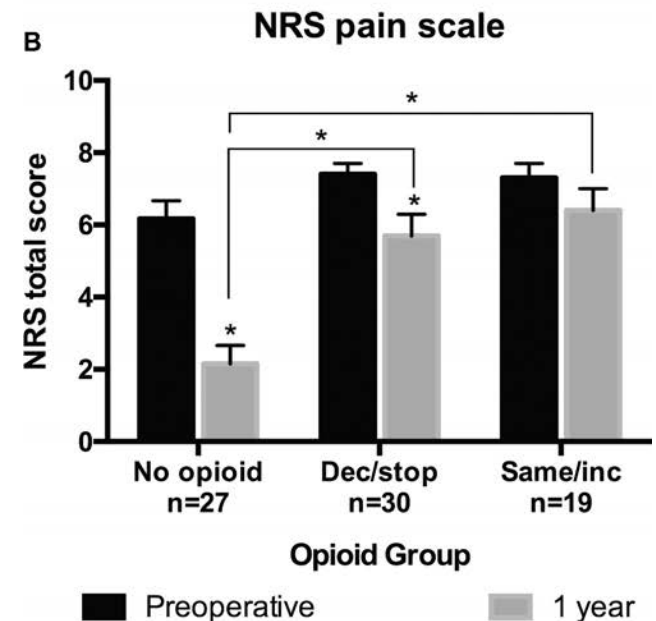
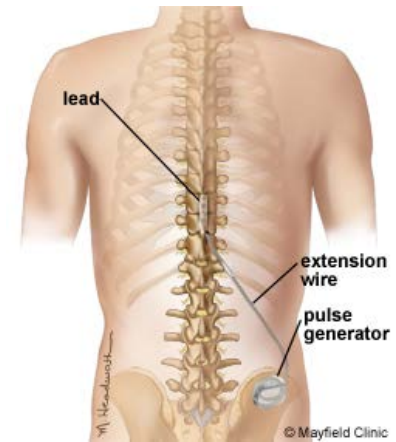
Paul J. Feustel, PhD*

Sarah E. McCallum, PhD*

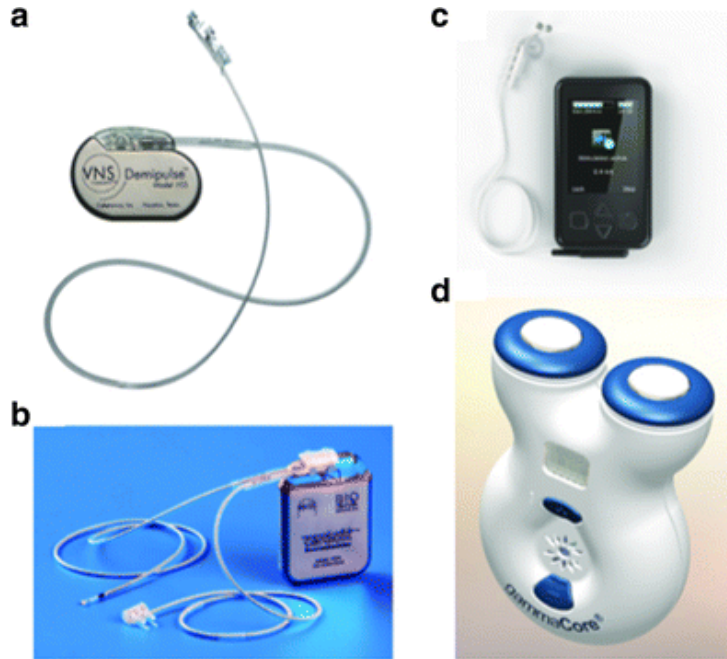
Julie G. Pilitsis, MD, PhD**

Spinal Cord Stimulation for the Treatment of Chronic Pain Reduces Opioid Use and Results in Superior Clinical Outcomes When Used Without Opioids

- 86 patients underwent SCS for chronic pain
 - 53 had used opioids for pain prior to surgery
- 64% of patients who were using opioids prior to SCS reduced (n = 2) or eliminated opioid use (n = 29) at 1 yr postoperatively
- Patients who eliminated opioid use or never used opioids had superior clinical outcomes to those who continued use.



Advances in Pain Research: FDA Approval for Vagus Nerve Stimulation in Headache



gammaCore® Receives FDA Clearance for the Acute Treatment of Pain Associated with Migraine Headache in Adult Patients



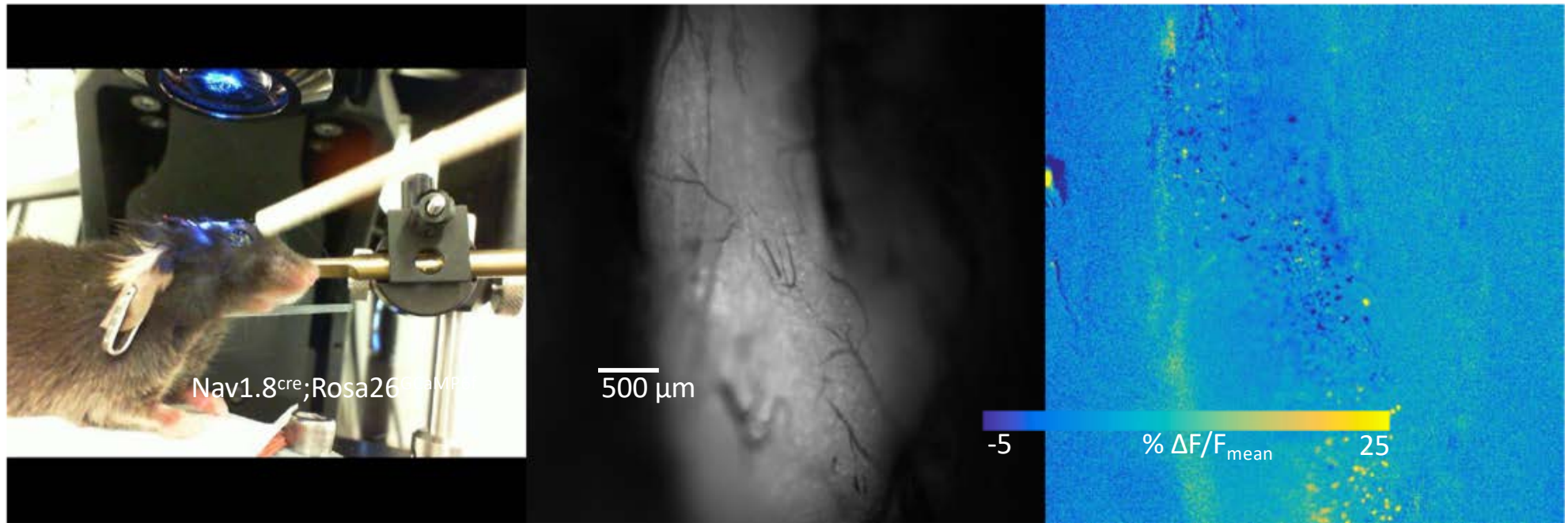
First non-invasive vagus nerve stimulation therapy applied at the neck provides new option for Americans living with migraine

FDA Releases gammaCore®, the First Non-Invasive Vagus Nerve Stimulation Therapy Applied at the Neck for Acute Treatment of Pain Associated with Episodic Cluster Headache in Adult Patients

[Curr Pain Headache Rep.](#) 2015 Dec;19(12):54.

Tools from the NIH BRAIN Initiative enable precise monitoring and modulation of neural circuit activity

Live cell imaging of GCaMP responses
in Nav1.8+ trigeminal ganglion neurons



NIH Support for Research in Multidisciplinary Pain Management Strategies

PI: Lynn DeBar, UH3NS088731

- Pragmatic clinical trial
- Hypothesis: patients who receive an interdisciplinary biopsychosocial intervention at their primary care clinic will have a greater reduction in pain impact in the year following than patients receiving usual care

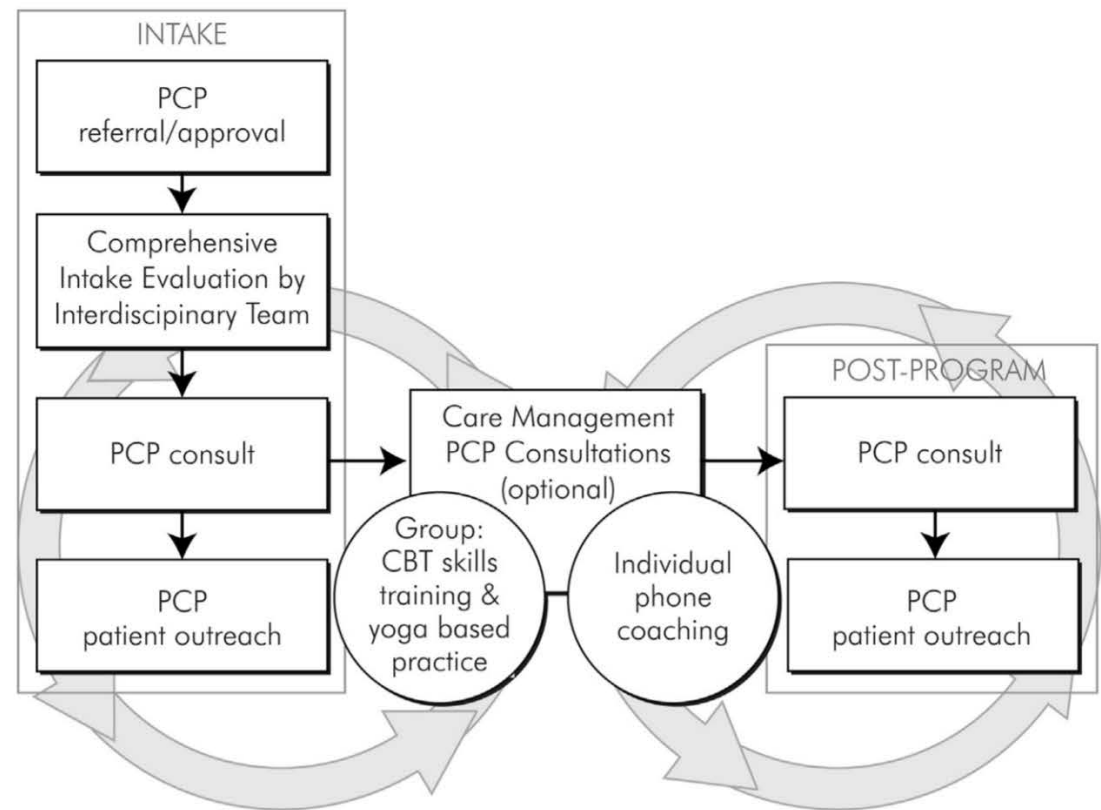


Fig. 2. PPACT intervention description.

[Contemp Clin Trials](#). 2018 Apr;67:91-99.

HEAL Initiative

Helping to End Addiction Long-term (HEAL) Initiative

1. Prevent addiction through enhanced pain management

- Understand Origins of Chronic Pain
- Develop New Non-Addictive Treatments for Pain
- Build Clinical Trial Network for Chronic Pain
- Enhance Precision Pain Management

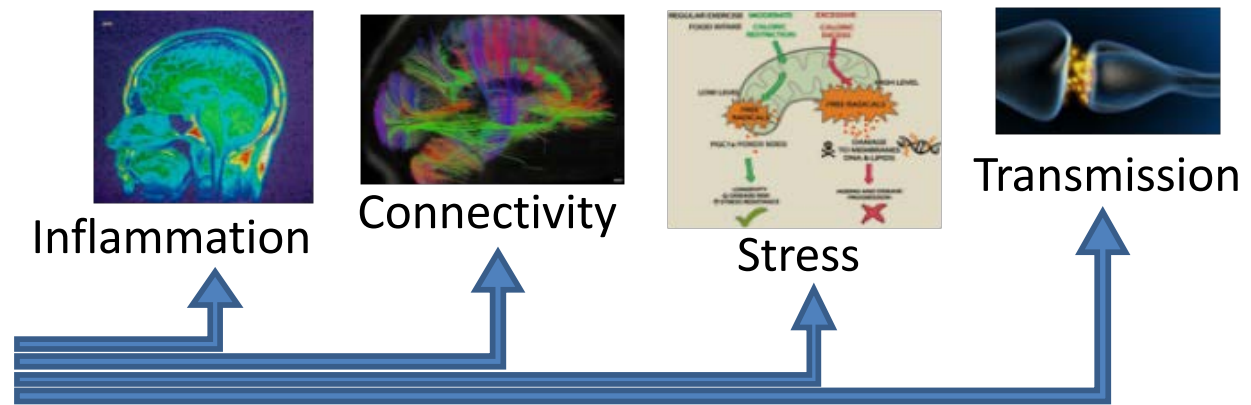
2. Improve treatments for opioid misuse disorder and addiction

- Improve Therapeutic Approaches to Addiction
- Evaluate Treatments, Consequences of NOWS
- Optimize Effective Treatments through Pilot Demonstration Projects



Announced April 4, 2018

Biomarkers to Accelerate the Development of Non-Addictive Pain Medications



The goal is to discover, optimize, and validate objective mechanistic markers associated with pain conditions to:

1. Enrich clinical study population:
 - ✓ Allow or improve cohort stratification
 - ✓ Provide predictors of treatment response
2. Demonstrate therapeutic target engagement

NINDS Pain Biomarker Efforts

- Workshop focused on “Best Practices for Biomarker Discovery” early 2019
- NINDS funding opportunities
- Centralized NINDS “one-stop” biomarker web page

Analytical Validation of a
Candidate Biomarker For
Neurological Disease

[*PAR-NS-18-549](#), [*PAR-18-550](#)

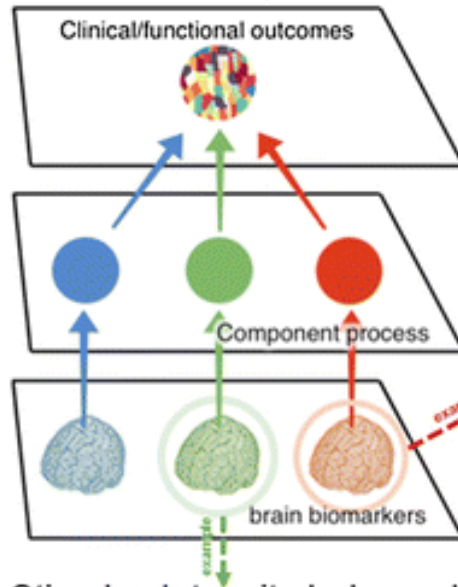
Clinical Validation of a
Candidate Biomarker For
Neurological Disease

[*PAR-NS-18-548](#), [*PAR-NS-18-664](#)

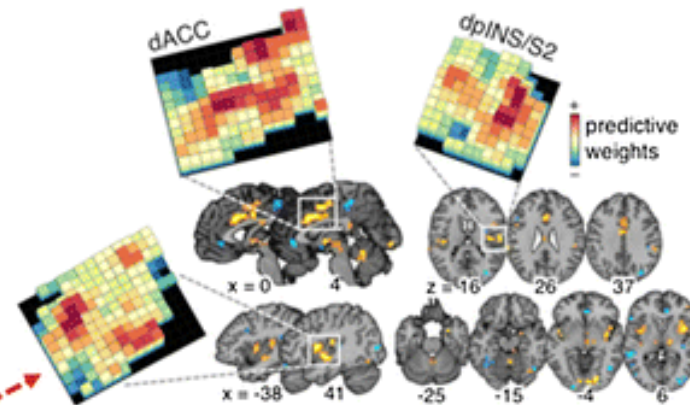
Cooperative Agreement Grant Mechanisms: U01 (Academic) and U44 (SBIR)

fMRI as a Biomarker for Pain

A Component Process Approach



C Neurologic Pain Signature (NPS)



D NPS 'Receptive Field'

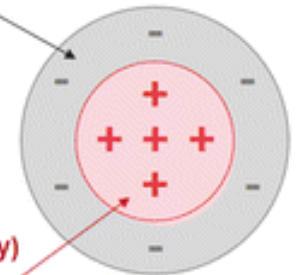
Specificity (Not activated by)

- Aversive images
- Social rejection
- Observed pain
- Pain anticipation
- Cognitive demand
- Nausea
- Cognitive reappraisal
- Pain recall
- Warmth

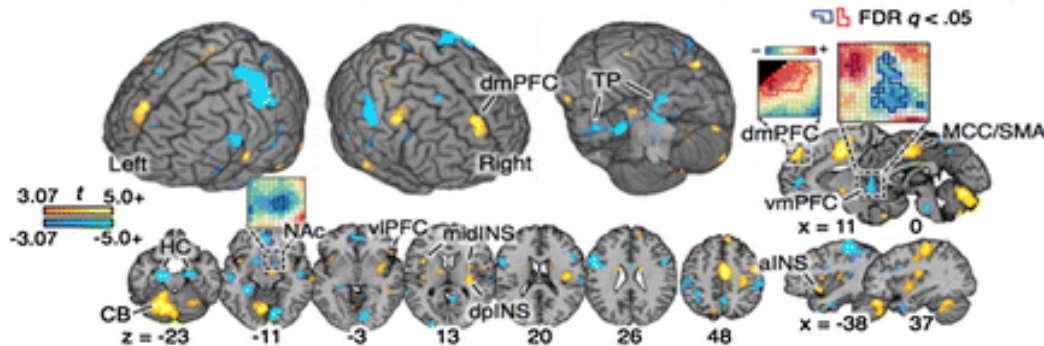
Sensitivity (Activated by)

- Gastric distention
- Esophageal distention
- Rectal distention
- Vaginal distention
- Cold pain
- Noxious pressure
- Electric shock
- Noxious heat

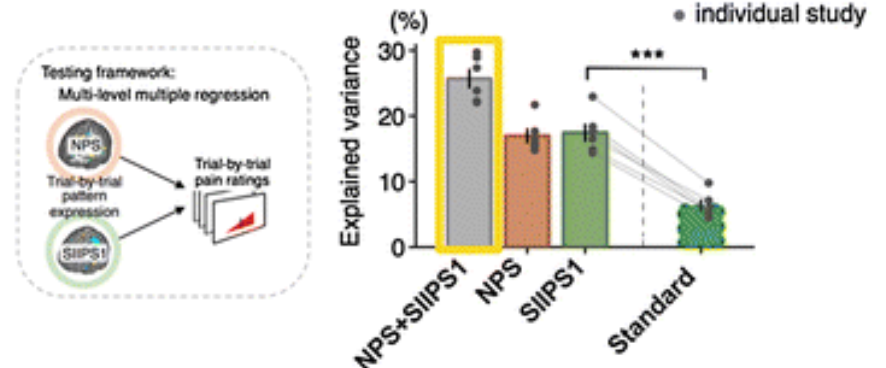
Light colors: Preliminary results
Dark colors: Published results



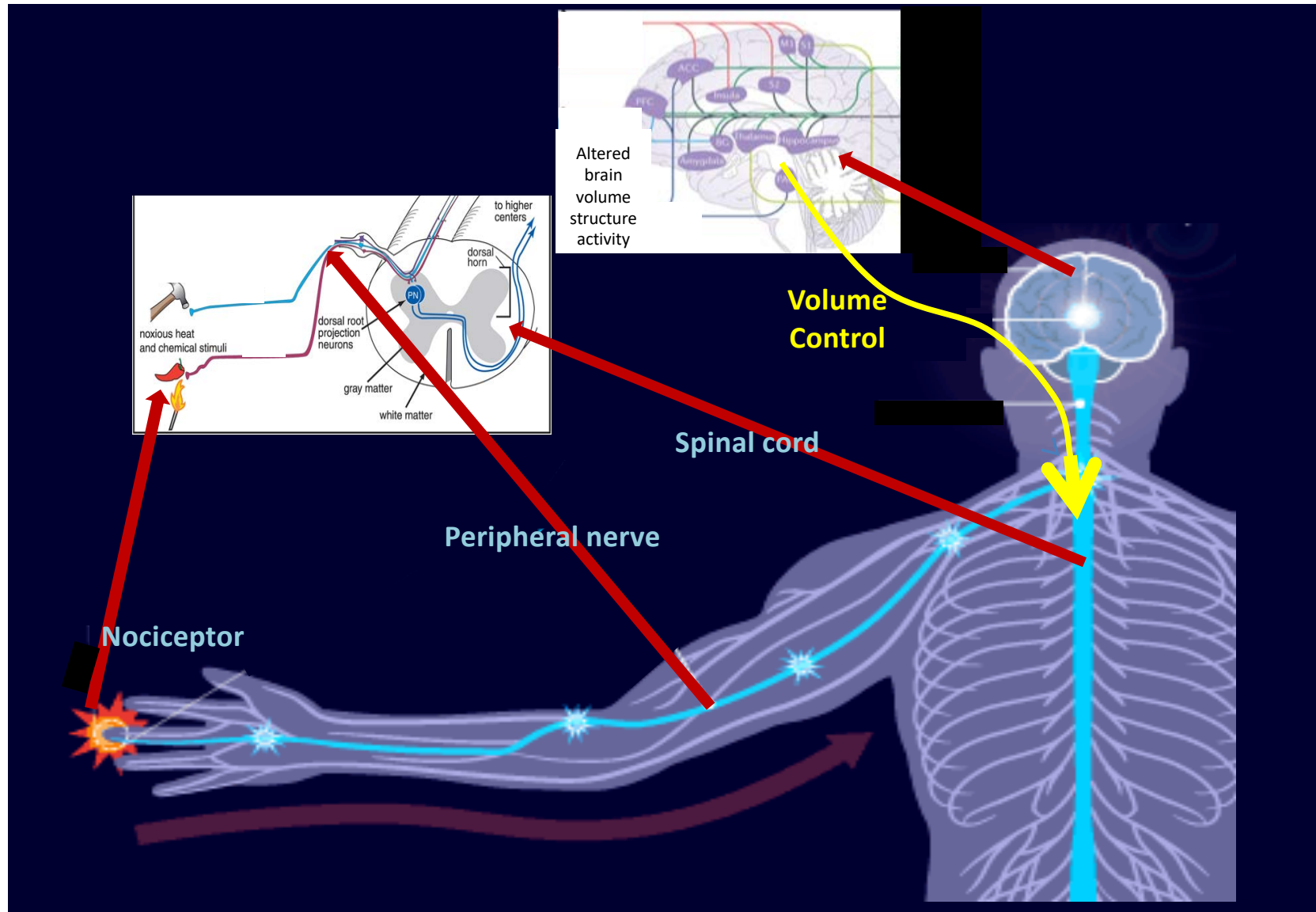
B Stimulus Intensity Independent Pain Signature-1 (SIIPS1)



E Benefits of a Combinatorial Model



Neural Circuitry Changes with Chronic Pain



Common Fund: Can we prevent chronic pain?

Gap: Risk predictors of the transition from acute to chronic pain

Goal: Identify those at risk for transition to chronic pain through mechanistic objective signatures

- Phenotyping, genotyping
- Imaging
- Omics

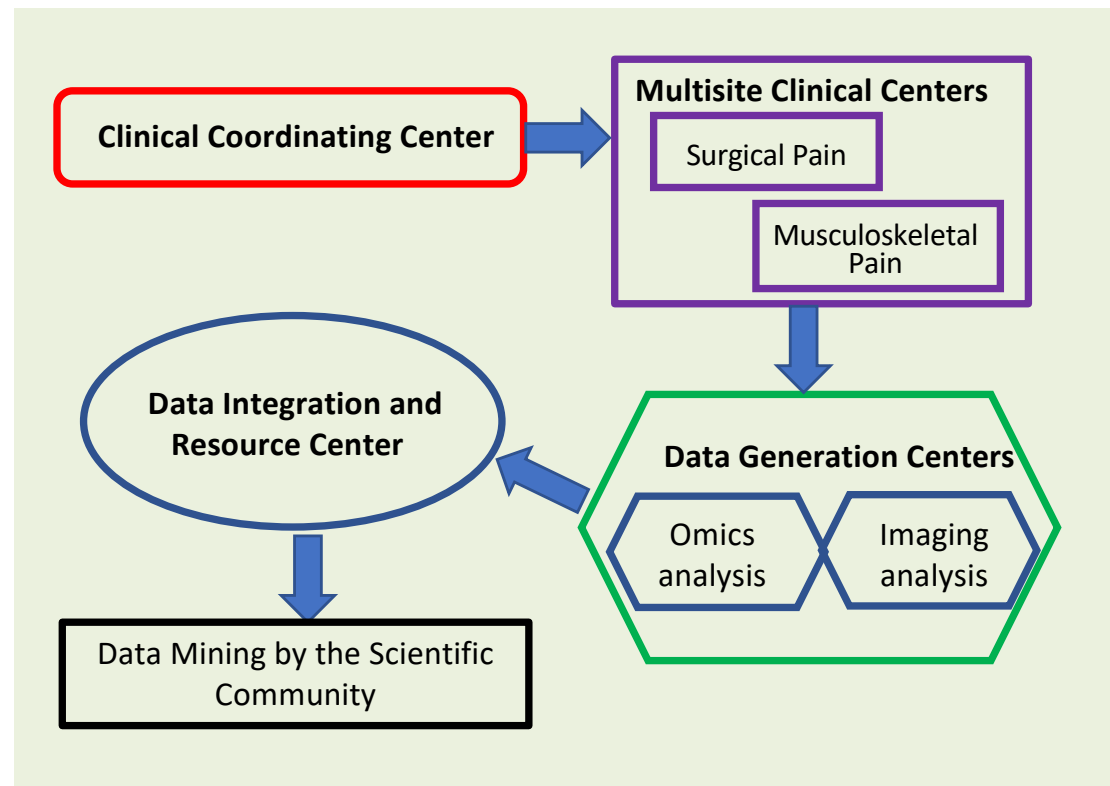


Justification

- Pain mechanisms
- Novel druggable targets
- Cohort stratification
- Prevention strategies

Outcomes

- Identification of combined biomarkers with clinically meaningful predictive value
- Comprehensive data set



Thank You!

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